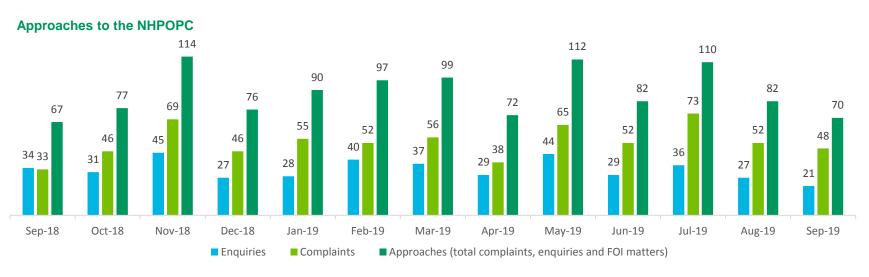
Monthly complaints report

Reporting period: 1 September 2019 to 30 September 2019





Approach	September 2019	er	July 201 Septemi 2019		September 2018	July 2018 – September 2018
Enquiries	21	ψ	84	V	34	110
Complaints	48	1	173	1	33	107
FOI matters*	1		5		n/a	n/a
Total	70	1	262	1	67	217
*New function of the NHPOPC as of 1 December 2018						

Complaints by profession	September 2019	Type of complaint	September 2019
Medical	23	Notification – complaint by notifier	23
Nursing	8	Registration – delay	12
Psychology	7	Registration – process/policy	5
Dental	4	Notification – complaint by practitioner	4
Paramedicine	3	Handling of Freedom of Information matter	1
Occupational Therapy	1	Notification – complaint by general public	1
Pharmacy	1	Privacy/Handling of information	1
Physiotherapy	1	Other	1
Total	48	Total	48

Location of complainant		Queensland
1 1 1		Victoria
2 2		Western Australia
3	14	New South Wales
3		South Australia
		 Australian Capital Territory
		Northern Territory
8		Tasmania
	13	Outside Australia
		Unknown

Investigations	September 2019	July 2019 – September 2019	
Open investigations	52	n/a	i
Investigations commenced	6	35	,
Investigations finalised	14	40	i /
Early resolution*/Warm transfers to AHPRA			,
*Early resolution transfer process commenced 1 September 2019, replacing warm transfers	17	55	-

Outcomes on investigations	September 2019	July 2019 – September 2019
Further explanation provided to the complainant by the NHPOPC	5	18
Assisted resolution	9	13
Formal comments provided to AHPRA/National Board	0	8
Apology provided by AHPRA	0	1
Total	14	40

Case study

Peyton was required to undergo a health assessment with Dr Green because the Board had received a notification that alleged she had a health impairment. The Board decided to take no further action after reading Dr Green's report, but Peyton later discovered that documents created during the health assessment had been saved to the electronic and hard copy records of the public health service that Dr Green works for. She told the NHPOPC that she had complained to AHPRA, but AHPRA did not take her complaint seriously.

The NHPOPC's investigation found AHPRA had made immediate contact with both Dr Green and the public health service to ask that the material be deleted. When this was refused, AHPRA sought reassurance that the material would be securely protected going forward. AHPRA then commenced a review of how it communicates with health assessors about their confidentiality and recording-keeping obligations, which has since resulted in AHPRA's standard templates being updated to make these obligations explicitly clear.

The NHPOPC was satisfied that AHPRA had taken appropriate action in response to Peyton's complaint. However, we noted that AHPRA could have communicated with Peyton more clearly about what it was doing so that she could feel reassured during the process. At the NHPOPC's request, AHPRA wrote to Peyton to apologise for the distress and inconvenience she had experienced, and to acknowledge the impact that this incident had had on her.